Lawrence County Treasurer's Office Tax Refund Exchange and Compliance System (TRECs)

Appeal Form

DATE:			
TAXPAYER NAME:			
CELL PHONE:	HOME PHONE: _		
ADDRESS OF OWNER:			
ADDRESS OF PROPERTY UNDER APP	PEAL:		
PARCEL NUMBER OF PROPERTY UN	DER APPEAL:		
PLEASE EXPLAIN THE REASON FOR THE	E APPEAL:		
Taxpayer signature		(Date)	
*********	*******Office use onl	y*****************	*******
Hearing Date	Hearing Officers		
Hearing Determination: Approved_	Denied	Comment	
If you disagree with the written dec	rision you may file an a	ction with the court	